



County of Los Angeles CHIEF EXECUTIVE OFFICE

713 KENNETH HAHN HALL OF ADMINISTRATION
LOS ANGELES, CALIFORNIA 90012
(213) 974-1101
<http://ceo.lacounty.gov>

WILLIAM T FUJIOKA
Chief Executive Officer

November 21, 2007

To: Bruce Chernof
Director, Department of Health Services

Marvin Southard
Director, Department of Mental Health

Jonathan Fielding
Director, Department of Public Health

Philip Browning
Director, Department of Public Social Services

From: William T Fujioka
Chief Executive Officer

A handwritten signature in black ink, appearing to be "W. T. Fujioka", is written over the printed name and title.

Board of Supervisors
GLORIA MOLINA
First District

YVONNE B. BURKE
Second District

ZEV YAROSLAVSKY
Third District

DON KNABE
Fourth District

MICHAEL D. ANTONOVICH
Fifth District

PROJECT 50: SKID ROW DEMONSTRATION PROJECT FOR CHRONIC HOMELESS

On November 20, 2007, the Board of Supervisors unanimously approved the attached motion authored by Supervisors Yaroslavsky and Molina establishing "Project 50", a demonstration program to identify, engage, house and provide supportive services to the 50 most vulnerable, long-term chronically homeless adults living on the streets of Skid Row. Project 50 will be carried out in collaboration with Sheriff Baca, the City of Los Angeles, the Los Angeles Homeless Services Authority (LAHSA), and the Veterans Administration of Greater Los Angeles Healthcare System (VA). A description of Project 50 is attached (Attachment 2).

Three of the key components of Project 50 require that we immediately identify a team of County employees from your departments to be trained by, and work with, Common Ground of New York as well as representatives of LAHSA and the VA in a team process.

1. **Project 50 Registry Creation:** The first component is the creation of a registry of the chronic homeless living on the streets of Skid Row. The registry is created through a 14 day process that includes training/orientation, an initial one night

"street count" to develop baseline numbers of the homeless, and then a street-based survey of homeless persons encountered on the streets between 4 a.m. and 6 a.m. on 12 consecutive days. The street-based survey information is used to create the Registry. The information in the Registry will produce a Common Grounds Vulnerability Index score that gives weight to the length of homelessness, time spent on the streets of Skid Row, and health and mental health status. Based upon the Vulnerability Index scores, the 50 most vulnerable chronic homeless adults who have lived on Skid Row the longest using are selected to be the Project 50 "Anchors". Eight teams, of 2 persons, each are needed for this process. Each of your departments needs to identify at a minimum four staff members to serve on the Project 50 Registry Team. These staff members need to be professional level staff that work with homeless adults and have the interest and energy to be trained and participate in this process at the times required.

2. **Project 50 Outreach Team:** Secondly, the County needs to establish a Project 50 Outreach Team with LAHSA and the VA. The Project 50 Outreach Team will also be trained by Common Ground "Street to Home" outreach and housing placement. The training includes assessment and engagement techniques linked to housing placement for the Anchors. Eight staff are needed for this component and, therefore, two from each of your departments will need to be selected. The selected staff may be the same as those used for the Registry development process. The Project 50 Outreach Team will be needed for up to six months.
3. **Project 50 Integrated Supportive Services Team:** Third, the County will form a Project 50 Integrated Support Services Team composed of a Team leader, a substance abuse counselor from DPH, a registered nurse from DHS, a mental health psychiatrist and clinical social worker from DMH, and a GR eligibility worker from DPSS. This Team will be in place for approximately two years and will provide ongoing, integrated supportive services to the 50 Anchors. The members of the Project 50 Integrated Supportive Services Team may have been members of the Project 50 Outreach Team.

To the extent feasible, we request your departments to consider how you may fund the positions required for the three County staffed components of Project 50 out of your current budget. We recognize that this might not be doable, however, and are working to identify Homeless and Housing Program funds to cover the cost of positions for which there is no practical way for the department to fund.

Project 50 is another top priority, historic undertaking by the Board of Supervisors to advance new and creative programs to end homelessness in Los Angeles County. If we successfully move 50 of the most vulnerable, longstanding chronic homeless

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adults off of the streets of Skid Row into permanent supportive housing, we will have turned a huge corner in making real progress toward wiping out homelessness in our communities. As with our other homeless prevention initiatives, Project 50 will require our commitment to productive collaborations within the County family and with our many partners including the City of Los Angeles, LAHSA, other public agencies and our community based organizations.

We will follow-up next week with a conference call to discuss the specific staff competencies that are needed for the above three tasks. For purposes of this call, please identify one of your managers to be your Project 50 lead and provide that information to Deputy Chief Executive Officer Lari Sheehan no later than noon on Monday, November 26, 2007. You may reach Lari at 213-893-2477 or lsheehan@ceo.lacounty.gov.

WTF:LS:ib

Attachments

c: Members, Board of Supervisors

SYN. NO. _____

AGN. NO. _____

MOTION BY SUPERVISORS YAROSLAVSKY AND MOLINA

November 6, 2007

According to the recently released Los Angeles Homeless Services Authority (LAHSA) 2007 Homeless Count, 73,000 homeless people live in Los Angeles County. On any given night, approximately 22,376 chronically homeless people look for shelter on our streets. The U.S. Department of Housing and Urban Development (HUD) defines a chronically homeless person as: *"An unaccompanied individual with a disabling condition who has been continually homeless for one year or more, or has experienced four or more episodes of homelessness within the past three years."*

While the County had an overall 17% decline in the number of homeless persons since the 2005 count, Skid Row had a 40% increase in the number of homeless persons, from 3,668 to 5,131 in 2007. The results from the LAHSA report indicate that Skid Row remains a unique concentration of homeless people representing one of the most densely populated areas in the United States.

Several cities in various parts of the country with highly concentrated homeless populations have successfully implemented a new strategy to target the most chronically homeless and vulnerable persons living in these communities. The "Street to Home" strategy initiated by Common Ground in New York City focuses efforts on those who have been on the streets the longest and prioritizes permanent supportive

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housing for individuals based on the likelihood that a client will die on the streets. This targeted approach is showing positive results in New York, Atlanta, Boston, Chicago, Denver and Washington, D.C.

Common Ground's program involves the use of a "Vulnerability Index" developed through medical research to identify the "anchors" of a homeless community. The Vulnerability Index is a weighted score which incorporates an individual's risk factors as well as the length of time of their current episode of homelessness and determines which clients have the greatest need for immediate housing placement. In the 20-block area of Times Square, Common Ground found that the placement of these "anchors" into permanent supportive housing had an extremely positive effect on homelessness overall, with a reduction of as much as 87% in homeless people sleeping on the streets after just two years.

It is noteworthy that studies show that the provision of supportive services linked to permanent housing for the chronically homeless in programs such as Common Ground's "Street to Home," reduces the use of high-cost public services. Placement of homeless people with severe mental illness or co-occurring substance abuse into permanent supportive housing is associated with reductions in hospitalizations, incarcerations, and subsequent use of shelters, emergency rooms, and psychiatric and detoxification programs.

On October 4, 2007, a day long conference to address regional homelessness was convened by the Chairman of the Board of Supervisors in conjunction with Mr. Philip Mangano, Executive Director of the U.S. Interagency Council on Homelessness and Ms. Rosanne Haggerty, Founder and President of Common Ground, with major funding from the Rockefeller Foundation. National experts on homelessness from various states traveled to Los Angeles to participate with Supervisors' Deputies on

Homelessness, key County Department homelessness staff, County Community Development Commission staff, and representatives of the Mayor of the City of Los Angeles, the Los Angeles Homeless Services Authority, the City of Santa Monica, the Los Angeles Police Commission, United Way of Greater Los Angeles, and Continuums of Care for Long Beach, Pasadena and Glendale. The key outcome of the Conference was the unanimous resolution by all attendees to initiate, within 100 days, a new effort to move 50 of the most long term chronically homeless persons from the most concentrated area of homelessness in Los Angeles County (Skid Row) into permanent supportive housing, using the Common Ground "Street to Home" model which has proven to be highly successful in New York City. To assist in swiftly moving this project forward, Common Ground has indicated it is available to work with Los Angeles County, and Skid Row Housing Trust has graciously agreed to provide 50 housing units to the project utilizing sponsor based Shelter Plus Care rental assistance.

WE, THEREFORE, MOVE that the Board of Supervisors:

1. Approve "Project 50" as the County's demonstration program, in collaboration with Sheriff Baca, the City of Los Angeles, LAHSA and Veterans Administration (VA) Greater Los Angeles Healthcare System to house and provide critical supportive services to 50 of the most vulnerable, long-term chronically homeless adults living on the streets of Skid Row;
2. Direct the Chief Executive Officer (CEO) to take the following steps to begin the implementation of Project 50 within 100 days of October 4, 2007:
 - a. Coordinate the initial planning between the conference Chairs, Los Angeles County, the City of Los Angeles and LAHSA;
 - b. Negotiate and award a sole source contract, including a scope of work and deliverables, with Common Ground to provide training on its "Street to Home"

program to select County staff and invited staff from the Cities of Glendale, Long Beach, Los Angeles, Pasadena, Santa Monica, LAHSA and VA. The contract should also provide the provision of onsite assistance to the County and City of Los Angeles in implementing the "Street to Home" model in Skid Row, including the identification of potential participants in Project 50 through the development of a registry, outreach and assessment of chronically homeless adults on Skid Row using the Common Ground Vulnerability Index. Funding for this contract shall not exceed \$80,000 and shall be provided from the County's Homeless Prevention Initiative/Homeless and Housing Program Fund "Community Outreach and Collaboration Strategy" funding category;

- c. Work with Common Ground and the County's Homeless Coordination Team to develop transitional services as needed; and to develop an interdepartmental staffing team, to be known as the "Project 50 Integrated Supportive Services Team", including a Project 50 team manager, to provide integrated supportive services for the Project 50 participants; ensure that the interdepartmental team includes appropriate staff from the Departments of Health Services, Mental Health, Public Health and Public Social Services; identify funding to support the Project 50 Team for a period of two years, and report back to the Board for action in 30 days or earlier;

3. Direct the CEO to negotiate and award a sole source contract, including a scope of work and deliverables, with Skid Row Housing Trust to designate 50 units in its Skid Row housing projects to house the Project 50 participants using sponsor based Shelter Plus Care rental assistance and additionally to provide case managers at the housing

subject to approval by the Board of the maximum sum and term prior to execution

projects to oversee the Project 50 participants and collaborate with the County's Project 50 Integrated Supportive Services Team; and

4. Direct the CEO, in collaboration with the Project 50 Integrated Supportive Services Team, the County Homeless Coordination Team, Sheriff Baca, the City of Los Angeles, LAHSA, the Veterans Administration Greater Los Angeles Healthcare System, the regional office of the U.S. Social Security Administration and other appropriate federal, State and local agencies to develop a viable process to collect data on the costs of prior and future institutional services provided to the Project 50 participants including arrests, incarcerations, hospital emergency and inpatient visits, mental health services, drug and alcohol rehabilitation/hospitalization, ambulance services, VA benefits and services, and other government financed services resulting initially from their chronically homeless state and from their participation in Project 50 housing and supportive services; and from this data develop a cost/benefit analysis of Project 50.

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SKID ROW "PROJECT 50"
DESCRIPTION OF MAJOR PROJECT COMPONENTS
11.18.07 Edits

1. Target Population

Fifty persons who have been living on the streets of Skid Row the longest and are at the greatest risk for death. These "Anchors" will be prioritized for housing based on Common Ground's Vulnerability Index which incorporates the latest research in death prevention for street homeless. Through intensive outreach, these fifty individuals will be placed into permanent supportive housing.

2. Skid Row Registry Creation

a. Registry Creation Team:

Common Ground will provide five trainers to lead and coordinate the registry creation on Skid Row with 16 participants from the County, City, Veterans Administration (VA) and Los Angeles Homeless Services Authority (LAHSA). Invitations to participate in the registry creation will also be offered to the Los Angeles Police Department and the following "continuum of care" cities: Glendale, Long Beach, Los Angeles, Pasadena and Santa Monica. Joint training through the registry creation will offer the utilization of a common methodology for documenting chronic homelessness, assessing housing and service needs, and prioritizing chronically homeless individuals for housing based upon length of homelessness and health related vulnerability.

b. Registry Creation Process:

The registry will include names, pictures, dates of birth and comprehensive information about health status, institutional history (e.g. jail, prison, hospital, military), length of homelessness, patterns of shelter/mission use and previous housing situation including zip code. It is estimated that it will take approximately 14 days to complete the registry. The first day will include an orientation for the Registry Creation team on strategy, techniques, survey instruments, communications plan, and safety for all participants. That night, from 10pm-2am, the team will do a "street count" of Skid Row to document base line numbers of the homeless and to establish standard measurement tool/practice for assessing overall homelessness on Skid Row streets and tracking impact of Project 50. For the next 12 days, eight teams of two persons each will be assigned clusters of six blocks and will cover those blocks every morning for the duration of the Registry creation process. Police will provide roving coverage but not work in direct contact

with team unless there is an emergency. From 4am-6am teams will administer the 15 minute survey to each person they encounter on their route, and keep a log of each person they encounter by name or description. This survey will produce a Vulnerability Index score that gives weight to length of homelessness, time spent on streets in Skid Row, and health and mental health status. On subsequent days, when the teams see the same person again, they will not administer the survey again, but note the individual's presence in a log.

After data is collected, teams will convene to input data, share findings, and discuss techniques for better data collection the next day. Data will be tabulated into an Access database upon completion to guide ongoing housing placement efforts. On the fourteenth day there will be a briefing of findings to the County and participants.

3. Project 50 Outreach

a. Assemble Project 50 Outreach Team:

Seven to eight staff will be selected from four key departments to serve as the Project 50 Outreach Team. The County departments involved will be Health Services (DHS), Mental Health (DMH), Public Health (DPH) and Public Social Services (DPSS). Outreach staff from the Veterans Administration and the Los Angeles Homeless Services Authority (LAHSA) will also be a partner in the Project 50 Outreach Team.

b. Common Ground Street to Home Training:

Common Ground's Street to Home staff will provide intensive one week training conducted in Los Angeles for all participating outreach and housing placement workers who will participate in Project 50. The training will include assessment and engagement techniques linked to housing placement. Common Ground Staff with extensive experience in outreach, engagement, housing placement, as well as clinical expertise in use of the Vulnerability Index, will conduct a five-day training for individuals who will be working directly with the Project 50 Anchors, including all outreach workers, housing specialists, psychiatrists, and clinicians. The training will be designed to progress in difficulty, starting with more basic topics and concluding with advanced skills for engaging the most challenging clients.

c. Engagement and Housing Placement:

Following Common Ground's intensive training, the Project 50 Outreach Team will begin working to place the 50 Anchors into permanent supportive housing.

d. Ongoing Technical Assistance:

Common Ground will provide additional technical assistance through follow-up support to the Project 50 Outreach Team as needed, to include clinical problem solving, site-visits, and hands-on feedback of techniques and strategies. Common Ground will conduct on-site technical assistance visits once every three months for six months. During these site visits, Common Ground staff will join the outreach team on their shifts, meet with the leadership, assist with brainstorming solutions to problems, and provide direct hands-on guidance and problem-solving help. Additionally, Common Ground will host monthly conference calls during which the team will report out on their outcomes, discuss what they have learned, and share challenges for group brainstorming. These calls will continue for six months.

During the housing placement period, Common Ground will provide direct assistance through their Los Angeles Field Manager, and through weekly conference calls with the Street to Home staff in New York City to address questions and concerns as they arise.

4. Housing Placement

a. Skid Row Housing Trust Shelter Plus Care Rental Assistance:

Skid Row Housing Trust (Trust) will commit 50 permanent housing units with Shelter Plus Care rental assistance to house individuals from Project 50. The units will be located in the five permanent housing sites operated by the Trust.

b. Housing Placement Requirements:

In order to place the Anchors in the housing, applications accompanied by required paperwork will need to be submitted to the Housing Authority of the City of Los Angeles (HACLA). "Required paperwork" includes documentation of identity, homeless status, income eligibility, TB testing, and disability assessment. The Anchors will be assisted by the Project 50 Outreach Team to keep all appointments and interviews as well as to fill out required forms and obtain documentation.

5. Supportive Services for Project 50 Anchors

a. During Outreach:

DHS, DMH, DPH and DPSS members of the Project 50 Outreach Team will be staff who are skilled in health, mental health, substance abuse and benefit disciplines that are relevant to the Project 50 Anchors. In terms of direct "transitional" services while the Anchors are still living on the streets, DMH will provide services through its Downtown Mental Health Clinic as well as MHSA Full Service Partnership services. The Veterans Administration (VA) has committed to provide supportive services to those Project 50 Anchors who are eligible based upon military service: available VA services include residential rehabilitation for health, mental health and substance abuse. There are also recuperative beds available at the Weingart Center in Skid Row. During the outreach period, documentation needed to qualify for Shelter Plus Care housing will be identified and sought; and analysis of each Anchor's eligibility for benefits including VA and SSI benefits will be conducted and applications made. Other "transitional" services may include temporary housing when Anchors are willing to accept it and prior to being qualified for Shelter Plus Care housing.

b. Integrated Supportive Services Team:

A Project 50 Integrated Supportive Services Team (Integrated Services Team) will be composed of appropriate staff from DHS, DMH, DPH and DPSS, and will include a Project 50 Team Manager. The Integrated Services Team will provide supportive services to the Anchors onsite at their housing location. Like the Skid Row Family Assessment Team, the Integrated Supportive Services Team will develop interdisciplinary, interdepartmental operational protocols and a shared electronic data base system for jointly collecting and sharing data and related information among team members about the supportive services needs and usage of each Anchor.

c. Onsite Case Managers:

Through a contract with the Skid Row Housing Trust, case managers will be located at each housing location who will provide 24/7 contact and assistance for the Anchors and collaborate with the Integrated Services Team regarding the supportive service and economic needs of the Anchors.

d. Additional Permanent Supportive Housing Options:

An analysis of additional permanent supportive housing options for the Anchors will be conducted and applicable programs, including benefit programs such as VA and SSI, will be applied for in a timely

manner so that there will be additional permanent supportive housing available for Project 50 Anchors who either initially or eventually choose to move into permanent supportive housing beyond Skid Row. This effort will include collaboration from the County and City housing authorities and LAHSA as well as appropriate resources from the County's Homeless Prevention Initiative including but not limited to the GR Rental Subsidy Program and Moving Assistance for Single Adults.

6. Project 50 Cost Benefits Analysis

- a. Skid Row Street Service Use and Costs:** A viable process to collect data on the costs of institutional services provided to Project 50 Anchors prior to their identification for participation in Project 50 will be developed with the Sheriff, other County departments, the City of Los Angeles, LAHSA, VA, the regional office of the U.S. Social Security Administration and other appropriate federal, state and local agencies. This process will include a standard timeframe and data collection protocol.
- b. Project 50 Participation Service Use and Costs:** The data collection process will also be used to collect information on institutional service costs for Project 50 Anchors as a result of their participation in Project 50.
- c. Comparative Analysis:** Pre- and Post-Project 50 Anchor institutional utilization and cost data will be analyzed to provide a data informed understanding of the cost and quality of life impact of street living versus a permanent supportive housing living. Institutional services for which data will be collected include but are not limited to: arrests, incarcerations, hospital emergency and inpatient visits, mental health services, drug and alcohol rehabilitation/hospitalization, ambulance services, criminal justice system costs, etc.